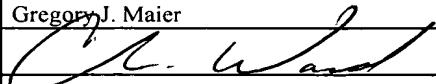


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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	249408US3 DIV
First Inventor or Application Identifier	Takahiro SHINGA
Title	METHOD AND DEVICE FOR FEEDING AND CUTTING A ROLLED TRANSFER PAPER WITH IMPROVED OPERABILITY

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents</small>		Commissioner for Patents ADDRESS TO: Mail Stop Patent Application Alexandria, Virginia 22313
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)		ACCOMPANYING APPLICATION PARTS
2. <input checked="" type="checkbox"/> Specification	Total Sheets	<input checked="" type="checkbox"/> Assignment was recorded at Reel 012052, Frame 0438
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113)	Total Sheets	<input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76
4. <input checked="" type="checkbox"/> Oath or Declaration	Total Pages	<input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <i>(when there is an assignee)</i> <input type="checkbox"/> Power of Attorney
a. <input type="checkbox"/> Newly executed (original or copy)		<input checked="" type="checkbox"/> English Translation Document <i>(if applicable)</i>
b. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) <i>(for continuation/divisional with box 17 completed)</i>		<input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).</small>		<input type="checkbox"/> Preliminary Amendment
5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)		<input checked="" type="checkbox"/> White Advance Serial No. Postcard
6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>		<input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>
a. <input type="checkbox"/> Computer Readable Form (CRF)		<input type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27</i>
b. Specification or Sequence Listing on :		<input checked="" type="checkbox"/> Other: Request for Priority
i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or		
ii. <input type="checkbox"/> Paper		
c. <input type="checkbox"/> Statements verifying identity of above copies		
17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:		
<input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP)		of prior application no.: 09/838,313
Prior application information: Examiner: ASHLEY, B. D. Group Art Unit: 3724		
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.		
18. CORRESPONDENCE ADDRESS		
<p>Customer Number 22850 (703) 413-3000 FACSIMILE: (703) 413-2220</p>		
Name:	Gregory J. Maier	Registration No.: 25,599
Signature:		Date: 3/2/2004
Name:	Christopher D. Ward	Registration No.: 41,367

22859 U.S.PTO
10/790003

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Docket No. 249408US3 DIV

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Takahiro SHINGA

SERIAL NO: New Divisional Application

FILING DATE: Herewith

FOR: METHOD AND DEVICE FOR FEEDING AND CUTTING A ROLLED TRANSFER PAPER WITH IMPROVED OPERABILITY

FEE TRANSMITTAL

COMMISSIONER FOR PATENTS
ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	2 - 20 =	0	x \$18 =	\$0.00
INDEPENDENT CLAIMS	1 - 3 =	0	x \$86 =	\$0.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)		+ \$290 =		\$0.00
<input type="checkbox"/> LATE FILING OF DECLARATION		+ \$130 =		\$0.00
		BASIC FEE		\$770.00
		TOTAL OF ABOVE CALCULATIONS		\$770.00
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<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE		+ \$130 =		\$0.00
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		TOTAL		\$770.00

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A check in the amount of to cover the filing fee is enclosed.

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The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check or credit card payment is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.

Date: 3/2/2004

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